United States District Court

for the

Eastern District of Texas

TOM HUSSEY PHOTOGRAPHY, LLC)))
Plaintiff(s) V.) Civil Action No. 4:24-CV-00092
AVENDELLE ASSISTED LIVING LLC and ASSURGENT, LLC d/b/a FRONTIER MARKETING)))
Defendant(s))

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) ASSURGENT, LLC d/b/a FRONTIER MARKETING 3204 Long Prairie Rd., Suite B Flower Mound, TX 75022

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Daniel DeSouza, Esq.

Copycat Legal PLLC 3111 N. University Drive, Suite 301 Coral Springs, FL 33065

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

			CLERK OF COURT
Date:	2/1/2024	WIND A STATE OF THE STATE OF TH	David A. O' Poole
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Signature of Clerk or Deputy Clerk

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Civil Action No. 4:24-CV-00092

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nan	ne of individual and title, if any)					
was red	ceived by me on (date)	·					
	☐ I personally served	the summons on the individual a	t (place)				
				; or			
	☐ I left the summons	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	on (date), a person of suitable age and discretion who resides ther, and mailed a copy to the individual's last known address; or						
	☐ I served the summo	ons on (name of individual)		, who is			
	designated by law to accept service of process on behalf of (name of organization)						
		on (date)					
	☐ I returned the sumn	; or					
	☐ Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalty of perjury that this information is true.						
Diti							
Date:		-	Server's signature				
			Printed name and title				
			Server's address				

Additional information regarding attempted service, etc: